



General Assembly

February Session, 2014

## ***Amendment***

LCO No. 3491

**\*SB0019703491SD0\***

Offered by:

SEN. WILLIAMS, 29<sup>th</sup> Dist.

SEN. LOONEY, 11<sup>th</sup> Dist.

SEN. COLEMAN, 2<sup>nd</sup> Dist.

SEN. DOYLE, 9<sup>th</sup> Dist.

SEN. LEBEAU, 3<sup>rd</sup> Dist.

SEN. DUFF, 25<sup>th</sup> Dist.

SEN. SLOSSBERG, 14<sup>th</sup> Dist.

SEN. STILLMAN, 20<sup>th</sup> Dist.

SEN. CRISCO, 17<sup>th</sup> Dist.

To: Senate Bill No. 197

File No. 37

Cal. No. 65

### ***"AN ACT DECREASING THE TIME FRAMES FOR URGENT CARE ADVERSE DETERMINATION REVIEW REQUESTS."***

1 Strike everything after the enacting clause and substitute the  
2 following in lieu thereof:

3 "Section 1. Subdivision (1) of subsection (c) of section 38a-591d of  
4 the 2014 supplement to the general statutes is repealed and the  
5 following is substituted in lieu thereof (*Effective October 1, 2014*):

6 (c) With respect to an urgent care request:

7 (1) (A) Unless the covered person or the covered person's  
8 authorized representative has failed to provide information necessary  
9 for the health carrier to make a determination and except as specified  
10 under subparagraph (B) of this subdivision, the health carrier shall  
11 make a determination as soon as possible, taking into account the

12 covered person's medical condition, but not later than [seventy-two]  
13 forty-eight hours after the health carrier receives such request,  
14 provided, if the urgent care request is a concurrent review request to  
15 extend a course of treatment beyond the initial period of time or the  
16 number of treatments, such request is made at least twenty-four hours  
17 prior to the expiration of the prescribed period of time or number of  
18 treatments.

19 (B) Unless the covered person or the covered person's authorized  
20 representative has failed to provide information necessary for the  
21 health carrier to make a determination, for an urgent care request  
22 specified under subparagraph (B) or (C) of subdivision (38) of section  
23 38a-591a, the health carrier shall make a determination as soon as  
24 possible, taking into account the covered person's medical condition,  
25 but not later than twenty-four hours after the health carrier receives  
26 such request, provided, if the urgent care request is a concurrent  
27 review request to extend a course of treatment beyond the initial  
28 period of time or the number of treatments, such request is made at  
29 least twenty-four hours prior to the expiration of the prescribed period  
30 of time or number of treatments.

31 Sec. 2. Subdivision (1) of subsection (d) of section 38a-591e of the  
32 2014 supplement to the general statutes is repealed and the following  
33 is substituted in lieu thereof (*Effective October 1, 2014*):

34 (d) (1) The health carrier shall notify the covered person and, if  
35 applicable, the covered person's authorized representative, in writing  
36 or by electronic means, of its decision within a reasonable period of  
37 time appropriate to the covered person's medical condition, but not  
38 later than:

39 (A) For prospective review and concurrent review requests, thirty  
40 calendar days after the health carrier receives the grievance;

41 (B) For retrospective review requests, sixty calendar days after the  
42 health carrier receives the grievance;

43 (C) For expedited review requests, except as specified under  
44 subparagraph (D) of this subdivision, [seventy-two] forty-eight hours  
45 after the health carrier receives the grievance; and

46 (D) For expedited review requests of a health care service or course  
47 of treatment specified under subparagraph (B) or (C) of subdivision  
48 (38) of section 38a-591a, twenty-four hours after the health carrier  
49 receives the grievance.

50 Sec. 3. Subdivision (1) of subsection (i) of section 38a-591g of the  
51 2014 supplement to the general statutes is repealed and the following  
52 is substituted in lieu thereof (*Effective October 1, 2014*):

53 (i) (1) The independent review organization shall notify the  
54 commissioner, the health carrier, the covered person and, if applicable,  
55 the covered person's authorized representative in writing of its  
56 decision to uphold, reverse or revise the adverse determination or the  
57 final adverse determination, not later than:

58 (A) For external reviews, forty-five calendar days after such  
59 organization receives the assignment from the commissioner to  
60 conduct such review;

61 (B) For external reviews involving a determination that the  
62 recommended or requested health care service or treatment is  
63 experimental or investigational, twenty calendar days after such  
64 organization receives the assignment from the commissioner to  
65 conduct such review;

66 (C) For expedited external reviews, except as specified under  
67 subparagraph (D) of this subdivision, as expeditiously as the covered  
68 person's medical condition requires, but not later than [seventy-two]  
69 forty-eight hours after such organization receives the assignment from  
70 the commissioner to conduct such review;

71 (D) For expedited external reviews involving a health care service or  
72 course of treatment specified under subparagraph (B) or (C) of

73 subdivision (38) of section 38a-591a, as expeditiously as the covered  
74 person's medical condition requires, but not later than twenty-four  
75 hours after such organization receives the assignment from the  
76 commissioner to conduct such review; and

77 (E) For expedited external reviews involving a determination that  
78 the recommended or requested health care service or treatment is  
79 experimental or investigational, as expeditiously as the covered  
80 person's medical condition requires, but not later than five calendar  
81 days after such organization receives the assignment from the  
82 commissioner to conduct such review."

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2014</i>	38a-591d(c)(1)
Sec. 2	<i>October 1, 2014</i>	38a-591e(d)(1)
Sec. 3	<i>October 1, 2014</i>	38a-591g(i)(1)